

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF DISH Network L.L.C. and NagraStar LLC	COURT CASE NUMBER 5:19-cv-01310-MAD-ATB
DEFENDANT John Henderson, Debra Henderson and Boom Media LLC	TYPE OF PROCESS Writ of Execution

**SERVE AT** { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Northern Credit Union  
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
120 Factory St., Watertown, New York 13601


SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW  Timothy M. Frank, Esq. Hagan Noll & Boyle, LLC 820 Gessner, Suite 940 Houston, TX 77024	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	1
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

You are requested to levy all accounts held in the name John Henderson, Debra Henderson, and Boom Media LLC.  
Bank service hours identified by the bank are: M - F 9:00 am to 5:00 pm.

Signature of Attorney other Originator requesting service on behalf of:  	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 713-343-0478	DATE 10/28/2020
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**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 52	District to Serve No. 52	Signature of Authorized USMS Deputy or Clerk DLm	Date 11/2/20
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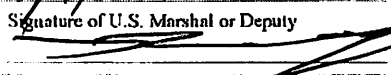
I hereby certify and return that ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

Robert Hayes

Address (complete only different than shown above)

<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Date 11/4/20	Time 12:18 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
Signature of U.S. Marshal or Deputy 	

Service Fee \$195.00	Total Mileage Charges including endeavors \$81.65	Forwarding Fee -	Total Charges \$276.65	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund)
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REMARKS: 11/2/20 TO SDUSM SYR for P/S - JSC

**PRINT COPIES**

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00